



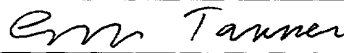
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Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. K2475.0001/P001	
		First Inventor Bart Kavanaugh	
		Title SYSTEM FOR FUNDING, ANALYZING, etc.	
		Express Mail Label No.	
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		Box Patent Application ADDRESS TO: Commissioner for Patents Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>	
3. <input checked="" type="checkbox"/> Specification [Total Pages 24] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings <i>(if filed)</i>- Detailed Description- Claim(s)- Abstract of the Disclosure		a. <input type="checkbox"/> Computer Readable Form (CRF)	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 10]		b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper	
5. Oath or Declaration [Total Pages 1] a. <input checked="" type="checkbox"/> Newly executed (original or copy)		c. <input type="checkbox"/> Statements verifying identity of above copies	
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small>		ACCOMPANYING APPLICATIONS PARTS	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small>		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of <small>(when there is an assignee)</small> Attorney	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____		11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
Prior application information: Examiner _____ Group / Art Unit: _____		12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations	
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.		13. <input type="checkbox"/> Preliminary Amendment	
19. CORRESPONDENCE ADDRESS		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>	
<input checked="" type="checkbox"/> Customer Number or Bar Code Label  24998		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
Name DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Jon D. Grossman		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
Address 2101 L Street NW		17. <input type="checkbox"/> Other. <div style="border: 1px solid black; height: 20px; width: 150px;"></div>	
City Washington	State DC	Zip Code 20037-1526	
Country US	Telephone (202) 785-9700	Fax (202) 887-0689	
Name (Print/Type) Christopher M. Tanner	Registration No. (Attorney/Agent) 41,518		
Signature 	Date Nov 9, 2001		

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2001</h2> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision.</p>		Complete if Known																																																																																																																																																																																																																																	
TOTAL AMOUNT OF PAYMENT (\$) 2,874.00		Application Number 60/246,755; 60/286,344 Filing Date November 9, 2000 First Named Inventor Bart Kavanaugh Examiner Name Not Yet Assigned Group Art Unit N/A Attorney Docket No. K2475.0001/P001																																																																																																																																																																																																																																	
METHOD OF PAYMENT 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> Deposit Account Number 04-1073 Deposit Account Name Dickstein Shapiro Morin & Oshinsky LLP </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</div> <div><input type="checkbox"/> Applicant claims small Entity status. See 37 CFR 1.27</div> </div> 2. <input checked="" type="checkbox"/> Payment Enclosed <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other		FEE CALCULATION (continued) 3. 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SUBMITTED BY Name (print/type) Christopher Mark Tanner Signature <i>Chris Tanner</i>		Complete (if applicable) Registration No (Attorney/Agent) 41,518 Telephone (202) 955-6692 Date November 9, 2001																																																																																																																																																																																																																																	